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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
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or **Fax** (571)-273-2885

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

20995 7590 03/16/2006
KNOBBE MARTENS OLSON & BEAR LLP
2040 MAIN STREET
FOURTEENTH FLOOR
IRVINE, CA 92614

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mallory K. de Merlier (Depositor's name)
[Signature] (Signature)
April 13, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/512,472	07/24/2001	Mark F. McCarthy	NUTRL018RA	5647

TITLE OF INVENTION: CHROMIUM/BLOTIN TREATMENT OF TYPE II DIABETES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	50	\$700	05/16/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
COOK, REBECCA	1614	514-188000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no names will be printed.

1. Knobbe, Martens, Olson
2. & Bear LLP
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

NUTRITION 21, INC.

Purchase, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10

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- ☐ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Mallory K. de MerlierDate 4/13/06Registration No. 51 609

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 01/06) Approved for use through 04/30/2007.

OMB 0651-0033

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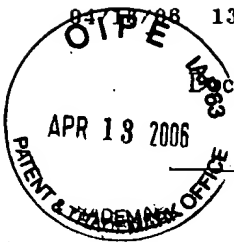
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April 13, 2006

Page 1 of 1

Please Direct All Correspondence to Customer Number 20995

ISSUE FEE TRANSMITTAL LETTER

Applicant : McCarty, Mark F.
App. No : 09/912,472
Filed : July 24, 2001
For : CHROMIUM/BIOTIN TREATMENT
OF TYPE II DIABETES
Art Unit : 1614
Class/Sub-Class : 514-188000
Examiner : Rebecca Cook

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I hereby certify that this correspondence and all
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April 13, 2006

(Date)

Mallery K. de Merlier, Reg. No. 51,609

MAIL STOP ISSUE FEE

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Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
(X) Please charge the total fees due in the amount of \$730 to Deposit Account No. 11-1410.
(X) \$700 Issue Fee
(X) \$30 Advance Order of 10 Copies.

The Commissioner is hereby authorized to charge any additional fees which may be required, or
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Mallery K. de Merlier
Registration No. 51,609
Attorney of Record
Customer No. 20,995
(619) 235-8550

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